

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	LW	68904	2/22/00
O.I.P.E. CLASSIFIER		21	3/5/00
FORMALITY REVIEW	YC	71425	3/31/00
RESPONSE FORMALITY REVIEW	YC	10029	6/19/00

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 ÷ Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
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Claim	Date
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions
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